



***Any Race, Any Place, Any Distance***

*Run in the 2015 Bank of America Chicago Marathon and raise awareness and funds for lupus programs and services in Illinois.*

**Running as a Lupus Charity Runner, you will receive:**

- ✓ Personalized fundraising web page to help reach fundraising goal
- ✓ Weekly e-blasts sent from LSI to help you with training and fundraising!
- ✓ Fundraising guide brimming with tips, ideas, suggestions!
- ✓ Exhilaration of doing good for others while doing well yourself!
- ✓ Incentives upon fundraising!

**Raise \$100:** 2 tickets to a pre-race pasta party upon reaching a minimum of \$100 in donations

**Raise \$250:** Chicago Area Runners Association (CARA) membership and training

**Raise \$500:** Lupus Charity Runners singlet

**Raise \$800:** Lupus Charity Runners Zip Up

**WHY RUN FOR THE LUPUS SOCIETY OF ILLINOIS?**

- The Lupus Society of Illinois' mission is to promote lupus awareness and complement the work of health care professionals by providing personalized resources for the lupus community while supporting research.
- The Lupus Society of Illinois is the only organization in Illinois providing services and programs for individuals living with lupus and those close to them.

*Your support helps us through:*

- Lupus educational opportunities
- Personalized assistance through the Lupus Personal Advisory Program
- Financial Assistance for lupus related costs
- 16+ Support Groups Statewide
- Individual Peer Support Network
- Volunteer Health Fair Programs

## Lupus Charity Runners Registration Form

Each Lupus Charity Runner agrees to raise awareness about lupus and the LSI!

- Personalized fundraising web page to help reach fundraising goal
- One year membership and training to CARA (Chicago Area Runners Association – local runners only)\*
- Lupus Charity Runners singlet upon reaching a minimum of \$500 in donations
- Lupus Charity Runners zip-up upon reaching \$800 or more
- Fundraising guide brimming with tips, ideas, suggestions
- 2 tickets to meet other Lupus Charity Runners at pre-marathon Pasta Dinner upon reaching \$100 in donations
- E-mail training tips, experienced team members available for any and all questions.

Please complete and submit the following:

Name \_\_\_\_\_

Marathon race confirmation number \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

Email address \_\_\_\_\_

Date of Birth \_\_\_\_\_ Gender \_\_\_\_\_

Have you run a marathon before? \_\_\_\_\_ T-shirt Size (please circle one) S M L XL XXL

Emergency Contact Name and Phone Number \_\_\_\_\_

I am running in honor / memory of \_\_\_\_\_

How did you hear about Lupus Charity Runners? \_\_\_\_\_

### **Release and Waiver (signature required)**

In consideration of being permitted to participate in Lupus Charity Runners to benefit the Lupus Society of Illinois ("the event"), I do hereby, for myself, and heirs and person representatives, release and discharge the Lupus Society of Illinois, event organizers and their affiliates, agents, employees, officers, directors, successors, assigns, and all other persons connected with this program, from any and all liabilities on account of any injury, death, or damage of every kind growing out of my participation in the event, whether caused by their negligence or otherwise. I am physically fit and sufficiently trained to participate in the event and recognize the risks involved, and intend by this release to assume full responsibility for anything that might happen to me.

Signature \_\_\_\_\_ Date \_\_\_\_\_

### **\*CARA Registration:**    YES   NO

At the time of registration for the Lupus Charity Runners, individuals planning to take advantage of the CARA training program pledge to raise at least \$250. The LSI requires a \$250 hold on a credit card through October 1, 2015. This hold will be released if the runner raises \$250 or more by October 1, 2015. If the runner does not raise the total \$250, the credit card will be charged the difference and will not exceed \$250.

Name as it appears on card \_\_\_\_\_

Billing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Card Number \_\_\_\_\_ CSV \_\_\_\_\_ (3 digit code on back of card) Exp Date \_\_\_\_\_

Signature: \_\_\_\_\_

**Please complete and return this form to:**  
**Brianna Svec**  
**Lupus Charity Runners Program**  
**Lupus Society of Illinois**  
**525 W. Monroe St., Suite 900; Chicago, IL 60661**  
Fax #: (312) 255-8020

**Questions? Email us at [Brianna@lupusil.org](mailto:Brianna@lupusil.org) or call (312) 542-0002**